

HEALTH STRATEGY

EXECUTIVE MEMBER: Cllr Geoffrey Blackwell

LEAD OFFICER: Keith Parker

REPORT AUTHOR: Keith Parker

Summary: This report asks for the Council's draft Health Strategy to be adopted.

Recommendation:	That the draft health strategy be adopted by the Council subject to any comments of the OSC Social Well-being with any amendments being delegated to the Head of Leisure and Environmental Services in consultation with the Portfolio Holder.
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Impact on delivering the Corporate Plan: The Health Strategy is one of the key Council strategies as identified in to the Improvement Board. Clearly the causes of ill-health or indeed good health under-pin many of the Council's objectives, like a decent home, a living wage, access to services, quality environment and so on.

Concluding the strategy and commencing delivery of its aims is a key Service Plan objective for Leisure and Environmental Services this year.

Impact on other statutory objectives (e.g. crime & disorder, LA21): There are identifiable links to Children and Young Peoples objectives, Crime and Disorder, Equality and Diversity and other statutory and non-statutory objectives.

Financial and human resource implications: Of this report and of the strategy itself none. Over time it is anticipated the Council will need to 'flex' existing resources if it is to have a positive impact on improving peoples health. Conversely by improving the health of our own employees there may be efficiencies derived from improved attendance.

Project & Risk Management: None

Key Decision Status

- **Financial:** None
- **Ward:** None

Other Ward

Implications:

1. INTRODUCTION

- 1.1 It is known that the residents of Copeland have a poorer quality of life in terms of their health than the national average is well known. 'New' national issues such as childhood obesity and alcohol related illness will impact on the borough as elsewhere. Many rural communities suffer greater health inequalities than more urban areas, as healthcare provision is more difficult to physically access, a problem which may increase as a result of further centralisation and cost controls within the professional healthcare sector.
- 1.2 The Health Act of 1999 places a statutory duty on local authorities to work with health organisations to improve the health of communities. The Council has increasingly used its position as a community leader to vocalise concerns about health services in the borough. Equally through its own activities and those partners though who it works it has the ability to have a direct and positive impact on residents health. It is against this background that the Draft Health Strategy has been prepared.
- 1.3 Attached to this report is the draft strategy. It is necessarily intended a short, succinct strategy which nevertheless enables the Council's managers to formulate future service plans against a defined framework. Its intention is to identify how the Council will conduct its business while being available to partners to demonstrate our commitment to improving health in the area. It has been developed with input from the local Primary Care Trusts and has been subject to consultation within the West Cumbria Partnership. However, it has not been subject to internal scrutiny and therefore it is recommended that the Strategy should be adopted subject to any final comments from the OSC Social well-being being incorporated. It is proposed that the detailed wording of any amendments be delegated to the Head of Leisure and Environmental Services and Portfolio Holder.
- 1.4 If adopted future monitoring of performance would be through the Council's normal corporate and service plan monitoring and by scrutiny of the high level health indicators for the borough. Accordingly is recommended Executive adopt the strategy subject to any final Scrutiny comments.

List of Appendices: Draft Health Strategy

List of Background Documents: None

List of Consultees: Cllr Geoffrey Blackwell; Corporate Team